



Spring Lake Outdoor Education Program

The City of San Marcos Parks and Recreation & Texas State University's Department of Health and Human Performance present this unique out-of-school-time program for Goodnight Middle School students from 4:00-6:00 PM on:

September 24, 26/October 1, 3, 8 10, 15, 17, 22, 24, 29, 31/November 5, 7, 12, 14 *Dates are subject to change. Any updates will be sent via email and Remind if necessary.

Please review the following SLOEP program guidelines before signing the registration form. Please keep this page for your records and return the signed registration form to the front office.

Check-In Policy:

- Students are required to go straight to the cafeteria when they are released.
- Students are required to arrive by 4:10 PM and may not leave early for any reason unless a parent/guardian picks them up. If a student arrives after 4:10 PM, they will not be allowed to participate and a parent/guardian will be notified.
- If a student must arrive after 4:10 PM due to another school program, they must bring a signed note from a Goodnight Middle School faculty member. Please note that the bus leaves at 4:20.
- Students will receive a snack and work on homework once they have checked in. At approximately 4:20 PM, students will load the bus and be taken to the Meadows Center (weather permitting – any updates will be shared via email and Remind text messaging).

Pick-Up Policy:

 Students may only be picked up by a parent/guardian or someone included on the pick-up list (page 2 of the registration form).

Late Pick-Up Policy:

 A late fee will be assessed if your child is not picked up by 6:00 PM at a rate of \$6.00 for every fifteen minutes that you are late.

Bus Policy:

- o Students will have the option to ride the bus home. In order to ride the bus, a parent/guardian must express permission by selecting the "ride the bus" option on page two of the registration form. Students who have not been given permission will **not** be allowed to ride the bus.
- In order to ride the bus, students must be live within regular Goodnight Middle School bus
- If your child usually rides the bus but will be picked up by a parent/guardian, please call or email Catherine Marler, Youth Services Coordinator, at cmarler@sanmarcostx.gov or 512-393-8249 prior to the session so that we can make note.
- Students must abide by the SMCISD transportation rules and regulations when on the bus.
- o There is a limit of 20 bus riders. This number could change based on the length of the route. If you would like your child to ride the bus home their form must be turned in by Monday, September 16. Bus riders will be accepted on a first come, first served basis.



Yes No



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GENERAL INFORMATION	: Please complete all of the fields	s below and print legibly					
STUDENT'S NAME:							
ADDRESS:		CITY:	ZIP:				
DATE OF BIRTH:	//	F	GRADE:				
PARENT EMAIL ADDRESS:							
CONTACT INFORMATION	l:						
CONTACT	NAME	PRIMARY PHONE #	SECONDARY PHONE				
PARENT OR							
GAURDIAN							
PARENT OR							
GUARDIAN							
PHYSICIAN							
nessages per week and s	ext message updates about the part of the	apply. You can unsubscribe at a	any time. YES NO				
Medication required duri	ng program hours?	NO IF YES, PLEASE L	ST TYPE AND QUANTITY				
		II not be administered by staff					
	Medication of any kind wil						

<u>LATE PICK UP POLICY:</u> A late fee will be assessed if your child <u>is not picked up by 6:00 pm</u> at a rate of \$6.00 for every fifteen minutes that you are late.

Please list below anyone you give permission to pick your child up from the program. They will be required to show ID. If the person is not on the list we will require a signed note and verbal confirmation from a legal guardian before we can release the participant.

NAME	PHONE #	RELATIONSHIP TO PARTICIPANT
My child will (YOU MUST SELECT ONE):		
☐ Ride the bus ☐ Be pic	ked up by parent/guardian or sor	neone on the above list
*PLEASE NOTE THAT THERE IS A LIMIT OF 20	BUS RIDERS AND THEIR FORMS	MUST BE RECEIVED BY MONDAY,
SEPTEMBER 16 IN ORDER TO BE ADDED TO		
OF THE ROUTE. BUS RIDERS WILL BE ACCEPTEGULAR SMCISD/GOODNIGHT MIDDLE SCI	•	
	RELEASE OF LIABILITY	
I, the undersigned, certify that my child is cu lof any information on this form may disquali	•	ddle School. I understand that falsification
In consideration of the acceptance of my chemosomers, the SAN MARCOS CONSOLIDATED employees, officers and servants from any a SLOEP PROGRAM, I certify that I have the leg	INDEPENDENT SCHOOL DISTRICT, and all damages and injuries which	TEXAS STATE UNIVERSITY and their agents, my occur while my child is enrolled in the
have read the program guidelines. I underst	•	
from this program.		, , , , , , , , , , , , , , , , , , , ,
Child's Name		
Signature of Parent or Guardian		
		/ /
Printed Name of Parent or Guardian		

PLEASE RETURN TO THE FRONT OFFICE

Should you have any questions, please contact:
Catherine Marler, Youth Services Coordinator cmarler@sanmarcostx.gov